

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

NEW PAC

ADDRESS (number and street)

P.O. BOX 7480

☐Check if different
than previously
reported. (ACC)

VISALIA

CA

93290

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00398750

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☒April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2011

through

03

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Toni Dian Nunes

Signature of Treasurer

Electronically Filed by Toni Dian Nunes

Date

06

15

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
NEW PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		67906.46
(b) Cash on Hand at Beginning of Reporting Period	67906.46	
(c) Total Receipts (from Line 19)	82800.00	82800.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	150706.46	150706.46
7. Total Disbursements (from Line 31)	30300.08	30300.08
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	120406.38	120406.38
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NEW PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	12300.00	12300.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	12300.00	12300.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	70500.00	70500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	82800.00	82800.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	82800.00	82800.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	82800.00	82800.00

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	26300.08	26300.08	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	26300.08	26300.08	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	4000.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	30300.08	30300.08	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30300.08	30300.08	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	82800.00	82800.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	82800.00	82800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	26300.08	26300.08
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	26300.08	26300.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NEW PAC

A.

Full Name (Last, First, Middle Initial)

CHARLES M (JR) ENGLISH

Mailing Address 423 4TH ST., NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer
THELEN REID & PRIEST

Occupation

ATTORNEY AT LAW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.7241

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

MORONGO BAND OF MISSION INDIANS

Mailing Address P.O. BOX 366

City

CABAZON

State

CA

Zip Code

92230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.7249

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

ROBERT C MOSS

Mailing Address 121 MAIN ST

City

YARMOUTH

State

ME

Zip Code

04096

FEC ID number of contributing
federal political committee.

C

Name of Employer
BOSTON CAPITAL

Occupation

SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.7262

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NEW PAC

A.

Full Name (Last, First, Middle Initial)
SANTA YNEZ BAND OF MISSION INDIANS

Mailing Address P.O. BOX 517

City State Zip Code
SANTA YNEZ CA 93460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 4 / 2 0 1 1

Transaction ID: SA11AI.7242

Amount of Each Receipt this Period

2300.00

B.

Full Name (Last, First, Middle Initial)
SANTA YNEZ BAND OF MISSION INDIANS

Mailing Address P.O. BOX 517

City State Zip Code
SANTA YNEZ CA 93460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 4 / 2 0 1 1

Transaction ID: SA11AI.7243

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

4300.00

TOTAL This Period (last page this line number only)

12300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NEW PAC

A.

Full Name (Last, First, Middle Initial)

ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Mailing Address 101 Constitution Ave NW
Suite 400W

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00089136

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

Transaction ID: SA11C.7255

Amount of Each Receipt this Period

5000.00

DATED: 2/28/11 REC'DD:
3/22/11

B.

Full Name (Last, First, Middle Initial)

AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 Connecticut Avenue NW
Suite 600

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C C00004275

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 1 1

Transaction ID: SA11C.7264

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 601 13th Street, NW
12th Floor

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00251876

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

Transaction ID: SA11C.7254

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
NEW PAC

A.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA CORPORATION FEDERAL PAC

Mailing Address 1909 K Street NW Suite 710
DC9-920-07-01

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C C00364778

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11C.7258

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G Street NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00194746

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11C.7250

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

CALIFORNIA DAIRIES INC FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 2198

City State Zip Code
LOS BANOS CA 93635

FEC ID number of contributing
federal political committee.

C C00349746

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11C.7245

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 25

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NEW PAC

A.

Full Name (Last, First, Middle Initial)
CLEAR CHANNEL COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE

Mailing Address 200 E. Basse Road

City State Zip Code
San Antonio TX 78209

FEC ID number of contributing
federal political committee. **C** C00279216

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11C.7256

Amount of Each Receipt this Period

3000.00

B.

Full Name (Last, First, Middle Initial)
CME GROUP, INC. PAC (CME/CBOT/NYMEX PAC)

Mailing Address 20 South Wacker Drive

City State Zip Code
Chicago IL 60606

FEC ID number of contributing
federal political committee. **C** C00076299

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11C.7257

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
DAVITA INC POLITICAL ACTION COMMITTEE ('DAVITA')

Mailing Address 601 Hawaii Street
C/O CONGRESSIONAL CONSULTANTS

City State Zip Code
El Segundo CA 90245

FEC ID number of contributing
federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

Transaction ID: SA11C.7253

Amount of Each Receipt this Period

2500.00

DATED: 2/28/11 REC'D:
3/22/11

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 25

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NEW PAC

A.

Full Name (Last, First, Middle Initial)

DIAGEO NORTH AMERICA INC EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE

Mailing Address 801 MAIN AVENUE
PO BOX 778

City State Zip Code
NORWALK CT 06851

FEC ID number of contributing
federal political committee.

C C00034470

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 1 / 2 0 1 1

Transaction ID: SA11C.7252

Amount of Each Receipt this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

EDISON INTERNATIONAL PAC

Mailing Address 520 S GRAND AVENUE SUITE 700

City State Zip Code
LOS ANGELES CA 90071

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Transaction ID: SA11C.7247

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

FMR LLC POLITICAL ACTION COMMITTEE (FIDELITY PAC)

Mailing Address 82 Devonshire Street
N5A

City State Zip Code
Boston MA 02109

FEC ID number of contributing
federal political committee.

C C00215046

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 1 / 2 0 1 1

Transaction ID: SA11C.7251

Amount of Each Receipt this Period

5000.00

DATED: 1/28/11 REC'VD:
3/11/11

SUBTOTAL of Receipts This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
NEW PAC

A.

Full Name (Last, First, Middle Initial)

INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)

Mailing Address 1399 New York Avenue
Suite 720

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00217638

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11C.7260

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

Mailing Address 1401 H STREET NW SUITE 1200

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11C.7246

Amount of Each Receipt this Period

5000.00

DATED: 1/19/11 REC'VD:
2/16/11

C.

Full Name (Last, First, Middle Initial)

NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 Madison Ave.
Room 1109

City State Zip Code
New York NY 10010

FEC ID number of contributing
federal political committee.

C C00158881

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 1 1

Transaction ID: SA11C.7238

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 25

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NEW PAC

A.

Full Name (Last, First, Middle Initial)

PRICewaterhouseCOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address 1301 K Street, NW
Suite 800WCity State Zip Code
Washington DC 20005FEC ID number of contributing
federal political committee.**C** C00107235

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	1	1

Transaction ID: SA11C.7244

Amount of Each Receipt this Period

5000.00

DATED: 1/11/11 REC'VD:
2/4/11**B.**

Full Name (Last, First, Middle Initial)

R.J. REYNOLDS POLITICAL ACTION COMMITTEE; REYNOLDS AMERICAN INC.

Mailing Address P. O. Box 718

City State Zip Code
Winston-Salem NC 27102FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	1	1

Transaction ID: SA11C.7240

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

TYCO ELECTRONICS CORPORATION POLITICAL ACTION COMMITTEE TELPAC

Mailing Address 607 14th Street NW
Ste. 250City State Zip Code
Washington DC 20005FEC ID number of contributing
federal political committee.**C** C00433482

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	1

Transaction ID: SA11C.7259

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 25

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NEW PAC

A.

Full Name (Last, First, Middle Initial)

US ONCOLOGY INC GOOD GOVERNMENT COMMITTEE

Mailing Address 16825 NORTHCHASE DRIVE SUITE 1300

City

HOUSTON

State

TX

Zip Code

77060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 1 1

Transaction ID: SA11C.7237

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

70500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
BANK OF AMERICA - CREDIT CARD

Mailing Address P.O. BOX 15715

City State Zip Code
WILMINGTON DE 19886

Purpose of Disbursement
PAC FUNDRAISING EVENT: ROOM RENTAL/FOOD/BEV

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7274

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1129.65

B. Full Name (Last, First, Middle Initial)
CAPITAL GRILLE

Mailing Address 601 PENNSYLVANIA AVE., NW

City State Zip Code
WASHINGTON DC 20004

Purpose of Disbursement
PAC FUNDRAISING EVENT: ROOM RENTAL/FOOD/BEV

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7274.0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1129.65

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
BANK OF AMERICA - CREDIT CARD

Mailing Address P.O. BOX 15715

City State Zip Code
WILMINGTON DE 19886

Purpose of Disbursement
OFFICE EXP: POSTAGE

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7276

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.60

SUBTOTAL of Disbursements This Page (optional)

1135.25

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC**A.** Full Name (Last, First, Middle Initial)
CARDMEMBER SERVICES - UNITED

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
TRAVEL

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7265

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 2 1 / 2 0 1 1

Amount of Each Disbursement this Period

2248.73

B. Full Name (Last, First, Middle Initial)
CARDMEMBER SERVICES - UNITED

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
OFFICE EXP: INSURANCE

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7266

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 2 1 / 2 0 1 1

Amount of Each Disbursement this Period

1023.40

C. Full Name (Last, First, Middle Initial)
ALLIED INSURANCE

Mailing Address P.O. BOX 10479

City DES MOINES State IA Zip Code 50306

Purpose of Disbursement
OFFICE EXP: INSURANCE

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7266.0

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 2 1 / 2 0 1 1

Amount of Each Disbursement this Period

1023.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

3272.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
CARDMEMBER SERVICES - UNITED

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING EVENT

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7268

Date of Disbursement

01 / 21 / 2011

Amount of Each Disbursement this Period

5249.64

B. Full Name (Last, First, Middle Initial)
CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC FUNDRAISING EVENT: ROOM RENTAL/FOOD/BEV

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7268.0

Date of Disbursement

01 / 21 / 2011

Amount of Each Disbursement this Period

761.55

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CAPITAL GRILLE

Mailing Address 601 PENNSYLVANIA AVE., NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
PAC FUNDRAISING EVENT: ROOM RENTAL/FOOD/BEV

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7268.1

Date of Disbursement

01 / 21 / 2011

Amount of Each Disbursement this Period

361.30

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

5249.64

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
FOGO DE CHAO BRAZILIAN STEAKHOUSE

Mailing Address 1101 PENNSYLVANIA AVE., NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
PAC FUNDRAISING EVENT: ROOM RENTAL/FOOD/BEV

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7268.2

Date of Disbursement

01 / 21 / 2011

Amount of Each Disbursement this Period

1156.79

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
TD GARDEN BOX OFFICE

Mailing Address 100 LEGENDS WAY

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
PAC FUNDRAISING EVENT: ROOM RENTAL/FOOD/BEV

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7268.3

Date of Disbursement

01 / 21 / 2011

Amount of Each Disbursement this Period

2970.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CARDMEMBER SERVICES - UNITED

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
TRAVEL

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7273

Date of Disbursement

01 / 21 / 2011

Amount of Each Disbursement this Period

1044.00

SUBTOTAL of Disbursements This Page (optional)

1044.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
CARDMEMBER SERVICES - UNITED

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
PAC FUNDRAISING EXP: ROOM RENTAL/FOOD/BEV

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7278

Date of Disbursement

03 / 06 / 2011

Amount of Each Disbursement this Period

4877.64

B. Full Name (Last, First, Middle Initial)
CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC FUNDRAISING EVENT: ROOM RENTAL/FOOD/BEV

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7278.0

Date of Disbursement

03 / 06 / 2011

Amount of Each Disbursement this Period

2227.64

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CARNEVINHO ITALIAN STKHS

Mailing Address 3325 LAS VEGAS BLVD

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement
PAC FUNDRAISER EVENT: ROOM RENTAL/FOOD/BEV

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7278.1

Date of Disbursement

03 / 06 / 2011

Amount of Each Disbursement this Period

2650.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

4877.64

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC**A.** Full Name (Last, First, Middle Initial)
CARDMEMBER SERVICES - UNITED

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
TRAVEL

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7281

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	1	1

Amount of Each Disbursement this Period

848.83

B. Full Name (Last, First, Middle Initial)
CARDMEMBER SERVICES - UNITED

Mailing Address P.O. BOX 94014

City PALANTINE State IL Zip Code 60094

Purpose of Disbursement
DONOR APPRECIATION

Candidate Name

003
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7282

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	1	1

Amount of Each Disbursement this Period

6690.00

C. Full Name (Last, First, Middle Initial)
WORLD AHEAD

Mailing Address 249 E OCEAN BLVD, #325

City LONG BEACH State CA Zip Code 90802

Purpose of Disbursement
DONOR APRECIATION

Candidate Name

003
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7282.0

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	1	1

Amount of Each Disbursement this Period

6690.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

7538.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
CONSULTING/OFFICE MGMT

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.7283

Date of Disbursement

01 / 27 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
TRAVEL

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.7285

Date of Disbursement

02 / 15 / 2011

Amount of Each Disbursement this Period

43.56

C.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
PAC FUNDRAISING EXP: BEVERAGE

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.7286

Date of Disbursement

02 / 15 / 2011

Amount of Each Disbursement this Period

583.26

SUBTOTAL of Disbursements This Page (optional)

1126.82

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC**A.**

Full Name (Last, First, Middle Initial)

COSTCO WHOLESALE

Mailing Address 3750 S MOONEY BLVD

City
VISALIAState
CAZip Code
93277Purpose of Disbursement
PAC FUNDRAISING EXP: BEVERAGE

Candidate Name

003
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7286.0

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	1

Amount of Each Disbursement this Period

583.26

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City
VISALIAState
CAZip Code
93291Purpose of Disbursement
OFFICE EXP: SUPPLIES/FEES

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7288

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	1

Amount of Each Disbursement this Period

272.84

C.

Full Name (Last, First, Middle Initial)

OFFICE DEPOT

Mailing Address 2425 S MOONEY BLVD

City
VISALIAState
CAZip Code
93277Purpose of Disbursement
OFFICE EXP: SUPPLIES/PAPER/INK

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7288.0

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	1

Amount of Each Disbursement this Period

210.41

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

272.84

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC

A.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
CONSULTING: OFFICE MGMT

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.7291
Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
TRAVEL

Candidate Name

002
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.7292
Date of Disbursement

03 / 17 / 2011

Amount of Each Disbursement this Period

138.66

C.

Full Name (Last, First, Middle Initial)
CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City VISALIA State CA Zip Code 93291

Purpose of Disbursement
TRAVEL

Candidate Name

002
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.7293
Date of Disbursement

03 / 17 / 2011

Amount of Each Disbursement this Period

360.00

SUBTOTAL of Disbursements This Page (optional)

998.66

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW PAC**A.**

Full Name (Last, First, Middle Initial)

CLARISSA N HENDERSON

Mailing Address P.O. Box 7474

City
VISALIAState
CAZip Code
93291Purpose of Disbursement
OFFICE EXP:

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7294

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	1	1

Amount of Each Disbursement this Period

124.27

B.

Full Name (Last, First, Middle Initial)

BILL TUCKER

Mailing Address 156 HUDSON TERRACE

City
PIERMONTState
NYZip Code
10968Purpose of Disbursement
DONOR APRECIATION

Candidate Name

003
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7297

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	6	/	2	0	1	1

Amount of Each Disbursement this Period

480.00

SUBTOTAL of Disbursements This Page (optional)

604.27

TOTAL This Period (last page this line number only)

26120.08

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NEW PAC

A. Full Name (Last, First, Middle Initial)
ELECT BLAKE FARENTHOLD COMMITTEE

Mailing Address P.O. BOX 3369

City State Zip Code
CORPUS CHRISTI TX 78463

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
RANDOLPH BLAKE FARENTHOLD

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 27

Transaction ID: SB23.7301

Date of Disbursement

03 / 31 / 2011

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
HELLER FOR CONGRESS

Mailing Address PO BOX 750580

City State Zip Code
LAS VEGAS NV 89136

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
DEAN HELLER

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 02

Transaction ID: SB23.7299

Date of Disbursement

03 / 31 / 2011

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

4000.00